

month later, and six months later. In addition, questionnaire data will be collected once from individuals contacted through Outreach programs.

The cost to respondents is estimated at \$32,300.00. These data will supplement a survey (announced in the **Federal Register** on 8/27/96) designed to assess

the full program's coverage of the target population.

Respondents	Number of respondents	Number of responses/respondents	Avg. burden/response (in hrs.)	Total burden (in hrs.)
Young people under 25 years of age in targeted prevention program communities:				
Skills-Building Workshops	3,000	1	2	6,000
Peer Outreach	1,000	1	0.5	500
Parents:				
Consent	3,000	1	0.05	150
Parent-Outreach	250	1	0.50	125
Organization Outreach	50	1	0.5	25
Total				6,800

Dated: March 19, 1997.

Wilma G. Johnson,

Acting Associate Director for Policy Planning And Evaluation, Centers for Disease Control and Prevention (CDC).

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[30DAY-2-97]

Agency Forms Undergoing Paperwork Reduction Act Review

The Centers for Disease Control and Prevention (CDC) publishes a list of information collection requests under review by the Office of Management and Budget (OMB) in compliance with the Paperwork Reduction Act (44 U.S.C. Chapter 35). To request a copy of these requests, call the CDC Reports Clearance Office on (404) 639-7090. Send written comments to CDC, Desk Officer; Human Resources and Housing Branch, New Executive Office Building, Room 10235; Washington, DC 20503. Written comments should be received within 30 days of this notice.

Proposed Project

1. National Nosocomial Infections Surveillance (NNIS) System—(0920-0012)—Reinstatement—The National Nosocomial Infections Surveillance (NNIS) system is currently the only source for national data on nosocomial (hospital-associated) infections in the United States. It first began collecting data in 1970. It is a collaborative project between the Hospital Infections Program of the Centers for Disease Control and Prevention (CDC) and voluntarily participating hospitals in the United States. The goals of the system are to: (1) Develop comparative nosocomial infection rates that can be used by hospitals to assess quality of care, (2) describe the scope and magnitude, including trends, of the nosocomial infection problem in the U.S., (3) identify risk factors associated with these infections, (4) assist hospitals in the effective use of surveillance data to improve the quality of patient care, and (5) conduct collaborative research studies. Data are collected using

protocols developed by CDC that define the specific populations of patients at risk, risk factors, and outcomes. The decision about which component(s) to use is made by each hospital depending on its own needs for surveillance data. The data are collected by trained surveillance personnel, assisted by hospital personnel, and are entered into IDEAS, a surveillance software which makes the data available for analysis at the hospital's convenience. The data are currently transmitted to CDC by floppy disk, then aggregated into a national database. During 1996, it will become possible for some hospitals to transmit the data to CDC through the NNIS telecommunications system. This system is expected to be used by all participating hospitals by 1997, resulting in reduced response time. NNIS methodology, which has been published, is the standard nosocomial infection surveillance methodology and is used at least in part by most U.S. hospitals. The total annual burden hours are 338.

Respondents	Number of respondents	Number of responses/respondent	Avg. burden/response (in hours)
Hospitals	319	14	0.0756

Dated: March 19, 1997.

Wilma G. Johnson,

Acting Associate Director for Policy Planning and Evaluation, Centers for Disease Control and Prevention (CDC).

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Administration For Children and Families

Office of Child Support Enforcement Statement of Organization, Functions, and Delegations of Authority

This Notice amends Part K, Chapter K of the Statement of Organization, Functions, and Delegations of Authority of the Department of Health and Human Services (DHHS), Administration for Children and Families (ACF) as follows: Chapter KF, The Office of Child Support

Enforcement (OCSE) (61 FR 32443) as last amended, June 24, 1996. This Notice reflects the Office of Child Support Enforcement's realignment of functions and the incorporation of new functional responsibilities due to new legislation.

Amend Chapter KF as follows:

1. KF.00 Mission. Delete its entirety and replace with the following:
KF.00 Mission. The Office of Child Support Enforcement (OCSE) advises the Secretary, through the Assistant